

2661 *[Signature]*

AMENDMENT TRANSMITTAL**PATENT**

Application No.: 09/753,004
 Filing Date: 12/29/2000
 First Named Inventor: Lakshminarayanan Venkataraman, et al.
 Examiner's Name: PHUNKULH, Bob A.
 Art Unit: 2661
 Attorney Docket No.: 81862.P224

- ☐ An Amendment After Final Action (37 CFR 1.116) is attached and applicant(s) request expedited action.
- ☒ Charge any fee not covered by any check submitted to Deposit Account No. 02-2666.
- ☒ Applicant(s) hereby request and authorize the U.S. Patent and Trademark Office to (1) treat any concurrent or future reply that requires a petition for extension of time as incorporating a petition for extension of time for the appropriate length of time and (2) charge all required fees, including extension of time fees and fees under 37 CFR 1.16 and 1.17, for any concurrent or future reply to Deposit Account No. 02-2666.
- ☐ Applicant(s) claim small entity status (37 CFR 1.27).

ATTACHMENTS

- ☐ Preliminary Amendment
- ☒ Amendment/Response with respect to Office Action
- ☐ Amendment/Response After Final Action (37 CFR 1.116) (reminder: consider filing a Notice of Appeal)
- ☐ Notice of Appeal
- ☐ RCE (Request for Continued Examination)
- ☐ Supplemental Declaration
- ☐ Terminal Disclaimer (reminder: if executed by an attorney, the attorney must be properly of record)
- ☐ Information Disclosure Statement (IDS)
- ☐ Copies of IDS citations
- ☒ Petition for Extension of Time
- ☒ Fee Transmittal Document (that includes a fee calculation based on the type and number of claims)
- ☐ Cross-Reference to Related Application(s)
- ☐ Certified Copy of Priority Document
- ☒ Other: Replacement Drawings, Figs. 1 and 2 (1 sheet plus redline version)
- ☐ Other: _____
- ☐ Check(s)
- ☒ Postcard (Return Receipt)

SUBMITTED BY:

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TYPED OR PRINTED NAME: Suk S. LeeSIGNATURE: *[Signature]*REG. NO.: 47,745DATE: Jan. 3, 2005ADDRESS: 12400 Wilshire Boulevard, Seventh FloorLos Angeles, California 90025TELEPHONE NO.: (408) 720-8300**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (if applicable)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria Virginia 22313-1450 on 01/03/2005

Judy L. Steinkraus

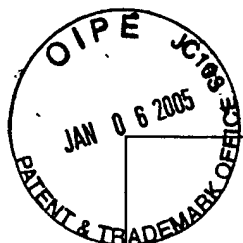
Date of Deposit

Name of Person Mailing Correspondence

01/03/2005

Send to: COMMISSIONER FOR PATENTS, P.O. Box 1450, Alexandria, Virginia 22313-1450

(10/14/03)



FEE TRANSMITTAL FOR FY 2005

(FY 2005 Begins 10/01/2004. Fee changes made on 11/22/04 and 12/08/04 are included.)

TOTAL AMOUNT OF PAYMENT (\$) 450.00

Complete if Known:

Application No. 09/753,004

Filing Date 12/29/2000

First Named Inventor Lakshminarayanan Venkataraman, et al.

Examiner Name PHUNKULH, Bob A.

Art Unit 2661

Attorney Docket No. 81862.P224

Applicant claims small entity status. See 37 CFR 1.27.

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number : 02-2666

Deposit Account Name: _____

☒ The Director is Authorized to do the following with respect to the above-identified Deposit Account:

Charge fee(s) indicated below.

☒ Credit any overpayments.

☒ Charge any additional fees during the pendency of this application.

☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

Charge fee(s) indicated below except for the filing fee

FEE CALCULATION

1A. BASIC FILING FEE/SEARCH FEE/EXAMINATION FEE

Large Entity		Small Entity		Fee Description		Fee Paid
Code	Fee (\$)	Code	Fee (\$)			
1011	300	2011	150	Utility application filing fee	} 1,000/500*	_____
1111	500	2111	250	Utility search fee		_____
1311	200	2311	100	Utility examination fee		_____
1012	200	2012	100	Design application filing fee	} 430/215*	_____
1112	100	2112	50	Design search fee		_____
1312	130	2312	65	Design examination fee		_____
1013	200	2013	100	Plant filing fee	} 660/330*	_____
1113	300	2113	150	Plant search fee		_____
1313	160	2313	80	Plant examination fee		_____
1004	300	2004	150	Reissue filing fee	} 1,400/700*	_____
1114	500	2114	250	Reissue search fee		_____
1314	600	2314	300	Reissue examination fee		_____
1005	200	2005	100	Provisional application filing fee		_____
SUBTOTAL (1) \$						_____

* List the filing, search, and examination fees separately, but pay concurrently.

1B. APPLICATION SIZE FEE

		<u>Extra Sheets</u>		<u>Fee from below</u>	<u>Fee paid</u>
Total Sheets	_____ - 100 =	_____ /50 =	_____ * X	_____	_____
*(round up to integer)					
<u>Large Entity</u>		<u>Small Entity</u>			
Fee	Fee	Fee	Fee		
Code	(\$)	Code	(\$)	<u>Fee Description</u>	
1081	250	2081	125	Utility application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)	
1082	250	2082	125	Design application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)	
1083	250	2083	125	Plant application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)	
1084	250	2084	125	Reissue application fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)	
SUBTOTAL (2) \$ _____					

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		<u>Extra Claims</u>		<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims	58	- 58** =	0	X _____	= _____
Independent Claims	9	- 9** =	0	X _____	= _____
Multiple Dependent				_____	= _____
**Or number previously paid, if greater; For Reissues, see below.					
<u>Large Entity</u>		<u>Small Entity</u>			
Code	(\$)	Code	(\$)	Fee	Fee
1202	50	2202	25	<u>Fee Description</u>	
1201	200	2201	100	Claims in excess of 20	
1203	360	2203	180	Independent claims in excess of 3	
1204	200	2204	100	Multiple dependent claim, if not paid	
1205	50	2205	25	**Reissue independent claims over original patent	
				**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (3) \$ _____ 0					



FIRST CLASS CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail on the date indicated below with sufficient postage addressed to:

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P.O. Box 1450
Alexandria VA 22313-1450

Judy L. Steinkraus *01/03/2005*

Judy L. Steinkraus

Application No.: 09/753,004	Filing Date: 12/29/2000	Docket No.: 81862.P224
Date Mailed: 01/03/2005	Due Date: 01/03/2005	
Client: Cisco Technology, Inc.		
Atty/Sec: LJV SSL jxs		
Title: A METHOD AND APPARATUS FOR CLEARING A LARGE NUMBER OF CONNECTIONS IN AN ATM NETWORK		
First Named Inventor: Lakshminarayanan Venkataraman, et al.		
<i>The following has been received in the U.S.P.T.O. on the date stamped hereon:</i>		
Transmittal Letters & Certificate of Mailing	Petitions & Appeals	
<input checked="" type="checkbox"/> Transmittal Letter	<input checked="" type="checkbox"/> Petition for Extension of Time: two months	
<input checked="" type="checkbox"/> Fee Transmittal (original & copy)	<input type="checkbox"/> Notice of Appeal	
<input type="checkbox"/> RCE (Request for Continued Examination)	<input type="checkbox"/> Appeal Brief & two copies (____ pgs. each)	
<input type="checkbox"/> Transmittal of Formal Drawings	<input type="checkbox"/> Reply Brief (____ pgs.)	
<input type="checkbox"/> Issue Fee Transmittal (original & copy)	Other	
<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> Information Disclosure Statement & PTO/SB/08 (____ pgs.) (previously 1449)	
<input type="checkbox"/> Express Mail No.:	<input type="checkbox"/> Request to Publish (Rescind NonPublication)	
Missing Parts, Formal Papers	<input checked="" type="checkbox"/> Drawings: 1 sheet, Replacement figures 1 and 2 plus red ink version	
<input type="checkbox"/> Response to Notice of Missing Parts	<input checked="" type="checkbox"/> Postcard	
<input type="checkbox"/> Assignment & Cover sheet (____ pgs.)	Checks	
<input type="checkbox"/> Declaration & POA (____ pgs.)	<input checked="" type="checkbox"/> Check No. 69660 Amount \$450.00	
Amendment / Response	<input type="checkbox"/> Check No. _____ Amount \$ _____	
<input checked="" type="checkbox"/> Amendment/Response (21 pgs.)		
<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Other: _____		